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REQUEST FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket No. 72167.000158	
In re Application Of	Albert Kwang-Hwa Sun		
Application Number	09/495,393		
Filed	January 31, 2000		
For	System and Method for Integrating Trading Operations Including the Generation, Processing and Tracking of and Trade Documents		
Group Art Unit	3624		
Examiner	Richard Weisberger		
Confirmation No.	4790		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate fee is as follows:</p>			
	Large Entity	Small Entity	Amount
<input checked="" type="checkbox"/> One Month	\$ 120.00	\$ 60.00	\$120.00
<input type="checkbox"/> Two Month	\$ 450.00	\$ 225.00	\$
<input type="checkbox"/> Three Month	\$1020.00	\$ 510.00	\$
<input type="checkbox"/> Four Month	\$1590.00	\$ 795.00	\$
<input type="checkbox"/> Five Month	\$2160.00	\$1080.00	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required; or credit any overpayment to Deposit Account No. 50-0206 . A duplicate of this sheet is attached.			
I am the	<input type="checkbox"/> applicant/inventor.		
	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71		
	Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).;		
	<input checked="" type="checkbox"/> attorney or agent of record.		
	<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).		
	Registration number if acting under 37 CFR 1.34(a). _____		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><u>January 9, 2006</u> Date</div><div style="width: 45%; text-align: center;"> Signature</div></div>			
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">Ozzie A. Farres Typed or Printed Name</div><div style="width: 45%; text-align: center;">43,606 Registration Number (if applicable)</div></div>			
<p>Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input checked="" type="checkbox"/> *Total of <u>1</u> form(s) is/are submitted.</p>			

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